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CONFIRMATION NO. 8675

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10/544,286		514	4131	X-15875

APPLICANTS

Dana Rae Benesh, Westfield, IN;
 Maria Jesus Blanco-Pillado, Indianapolis, IN;
 Charles Howard Mitch, Columbus, IN;
 Kumiko Takeuchi, Indianapolis, IN;

**** CONTINUING DATA *******

This application is a 371 of PCT/US04/03368 03/01/2004
 which claims benefit of 60/453,243 03/07/2003

**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
 09/13/2006

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance SR Initials	STATE OR COUNTRY IN	SHEETS DRAWINGS 0	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 6
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

ADDRESS

ELI LILLY & COMPANY
 PATENT DIVISION
 P.O. BOX 6288
 INDIANAPOLIS, IN 46206-6288
 UNITED STATES

TITLE

Opioid receptor antagonists

FILING FEE RECEIVED 1200	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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